## OFFICE OF THE MISSISSIPPI SECRETARY OF STA



STATEMENT OF ORGANIZATION FOR A POLITICAL COMMITTEE

Name	
Addre	ss of committee PO Box 24355
City, S	State, Zip Jackson, MS 39225 Email Cambio taleneeves
Phone	601. 936. 5866 FAX
Contac	et Person Cambi Burnham Phone 601. 936.5866 Email Cambie toleveen
Contac	et Full Address 4333 Lakeland Drive
	Flowood, MS 39232
	committee registered with the Federal Election Commission (FEC)? Yes No
	committee is authorized by a candidate: of Candidate
Addro	ss PO Box 24355, Jackson, MS 39225
Office Descrapplic	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:
Office Descrapplic	ribe, as concisely as possible, the purpose of this committee and, if
Office Desc applie	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  Value and Spend Funds To elect Take Reeves  As and addresses of all officers: (attach separate sheet if necessary)
Office Desc applie	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  The elect Take Reeves
Office Desc applic 72 Name	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  Value and Spend Funds To elect Take Reeves  As and addresses of all officers: (attach separate sheet if necessary)
Office Desc applic 72 Name	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  The Reeves  as and addresses of all officers: (attach separate sheet if necessary)  Name Tate Reeves  Office
Office Desc applic 7 Name A.	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  Take Reeves  as and addresses of all officers: (attach separate sheet if necessary)  Name  Address  Office  Address  Office  Address
Office Desc applic 7 Name A.	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  See and addresses of all officers: (attach separate sheet if necessary)  Name  Address  Name  Office  Office  Office  Office  Office
Descrapplic Name A.  B.	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  Solver and Solv
Desc applic Name A.	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  The Reeves  as and addresses of all officers: (attach separate sheet if necessary)  Name  The Reeves  Office  Address  Name  Office  Address  Name  Office  Office  Office  Office  Office  Office  Office  Office
Descrapplic A.  B.  C.	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  Colored Seand Spend Full Search
Descrapplic A.  B.  C.	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  Colored Seand Spend Full Search
Desc applic Name A. B.	ribe, as concisely as possible, the purpose of this committee and, if cable, the identification of affiliated or connected organizations:  Solvering Address  Name  Address  Name  Address  Name  Office

- Political Committees associated with statewide or multi-county elections should return the form to: Delbert Hosemann, Secretary of State, Elections Division, P.O. Box 136, Jackson MS 39205.
- Political Committees associated with single county elections should return this form to their County Circuit Clerk.

  Political Committees associated with municipal elections should return this form to their Municipal Clerk.